<sub>Form</sub> **990** 

# Return of Organization Exempt From Income Tax Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

OMB No. 1545-0047

2018

Open to Public Inspection

Department of the Treasury

Do not enter social security numbers on this form as it may be made public.
 Go to www.irs.gov/Form990 for instructions and the latest information.

Ā	Fau Aba (	019 calandar year ar tay year baginning language	2018, and en	dina	December	20 19				
<u>A</u>			zoro, and en	ung		cember , 20 18  D Employer identification number				
<u>,</u> B	Check if a				—— D Employ	<b>-</b>				
$\sqcup$	Address c		<del> </del>			46-1671796				
Ш	Name cha		ss) Room	/surte	E Telepho	ne number				
	Initial retui	n 1090 Vermont Ave, NW,		910		206-486-4488				
	Final return	terminated City or town, state or province, country, and ZIP or foreign postal coo	ie							
	Amended	return Washington, DC 20005			<b>G</b> Gross re	eceipts \$	129,051			
	Applicatio	pending F Name and address of principal officer: Brock Pierce		H(a) Is	this a group return for	subordinates? Tes	☑ No			
		1090 Vermont Ave, NW, Washington, DC 20005	•			s included? 🔲 Yes				
$\overline{}$	Tax-exem		a)(1) or 527	0		a list. (see instructio				
J Website: ►										
K Form of organization: ✓ Corporation ☐ Trust ☐ Association ☐ Other ►										
P	art I	Summary	_ <b>-</b>			<del>`</del>				
		Briefly describe the organization's mission or most significant act	ivities. The	Bitcoin Fo	undation coo	rdinates the effo	orts of			
٥	1	he members of the Bitcoin Community, helping to create awareness								
Governance	-	echnology requirements for Technologists, Regulators, Media and E								
Ě	_	Check this box ▶ ☐ if the organization discontinued its operation			than 25% of	ite not accete				
ove.				a or more	1	lis riet assets.	5			
Ğ	1	lumber of voting members of the governing body (Part VI, line 1a			3		5			
જ	1	lumber of independent voting members of the governing body (f		D)	4					
ř	1	otal number of individuals employed in calendar year 2018 (Part	v, line 2a)	~i 1 ' '	5		0			
Activities	1	otal number of volunteers (estimate if necessary)	۱ ۲ سند	/\	6		0			
ď		otal unrelated business revenue from Part VIII, column (C), line	B 1	( ⋅ № · ·	<u>7a</u>		0			
	<u>  d  </u>	let unrelated business taxable income from Form 300 (Time 38	<del>- 181</del>	<u>,</u>	7b		0			
)				Pr	ior Year	Current Ye				
Revenue	1	Contributions and grants (Part VIII, line 1h).		17,973		112,011				
		109.41.100.1100.101.100.1.11.11.11.11.11.11.1	12,911		17,040					
ě		nvestment income (Part VIII, column (A), lines 9, 4, and 70)	لند آل		6,138		0			
_	11 (	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c) (B)c) and	1 <del>1e)</del> .		0		0			
	12 1	otal revenue—add lines 8 through 11 (must equal Part VIII, column		37,022	· · · · · · · · · · · · · · · · · · ·					
		Grants and similar amounts paid (Part IX, column (A), lines 1-3).			0		0			
	14 E	Benefits paid to or for members (Part IX, column (A), line 4)			0		0			
Ś	15 5	Salaries, other compensation, employee benefits (Part IX, column (A)	, lines 5–10)		4,529		18			
nse	16a F	Professional fundraising fees (Part IX, column (A), line 11e)			0		0			
Expenses	b 7	otal fundraising expenses (Part IX, column (D), line 25)					-			
û	17 (	Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e)			57,504		83,310			
	18 7	otal expenses. Add lines 13-17 (must equal Part IX, column (A),	line 25) .		62,033		83,328			
	19 F	Revenue less expenses. Subtract line 18 from line 12			-25,011		45,723			
2 8		· · · · · · · · · · · · · · · · · · ·		Beginning	of Current Year	End of Ye	ar			
anc	20 7	otal assets (Part X, line 16)			16,122		24,442			
Ass 18a	21 7	otal liabilities (Part X, line 26)			-61,814		-89,950			
Net Assets or Fund Balances	22 1	let assets or fund balances. Subtract line 21 from line 20			-45,692		-65,508			
	art II	Signature Block	<del>- i - i - i</del>		<u></u> -					
_		es of perjury, I declare that I have examined this return, including accompanying si	chedules and st	atements, an	d to the best of r	nv knowledge and	belief, it is			
		and complete. Declaration of preparer (other than officer) is based on all informatio				,				
_		1 the	<del> </del>	<del>,,</del>	July 26, 2019					
Sign		Signature of officer	· · · · · · · · · · · · · · · · · · ·		Date	·				
He		Llewellyn Claasen, Former Executive Director								
	.	Type or print name and title								
_		Print/Type preparer's name Preparer's signature	·· - 1	Date	T	PTIN				
Pa		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,			Check     self-emp	#				
	eparer				<del></del>	,				
Us	e Only				Firm's EIN ▶					
N4c	v the IDC	Firm's address	tions)		Phone no					
		discuss this return with the preparer shown above? (see instruc			<u>· · · · · · · · · · · · · · · · · · · </u>	Yes				
For	raperwo	rk Reduction Act Notice, see the separate instructions.	Ca	t. No. 11282\	r	Form 😸	90 (2018)			

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Part	<del>_</del>	•	Down III	
1	Briefly describe the organization's m	a response or note to any line in this I ission:	<u> </u>	· · · · <u>•</u>
•	,	e efforts of the members of the Bitcoin Co	mmunity, helping to create awarenes	s of the
	benefits of Bitcoin, how to use it and it	s related technology requirements for Tecl	nnologists, Regulators, Media and E	veryone
	else globally.			
2	Did the organization undertake any s	significant program services during the y	ear which were not listed on the	
2	prior Form 990 or 990-EZ?			☐ Yes ☑ No
3		s on Schedule O. cting, or make significant changes in		□vas (INa
	If "Yes," describe these changes on			☐ Yes  ☑ No
4	<del>_</del>	service accomplishments for each of it	s three largest program services.	as measured by
-	expenses. Section 501(c)(3) and 501	(c)(4) organizations are required to repony, for each program service reported.		
4a	(Code:) (Expenses \$	including grants of \$	) (Revenue \$	)
4b	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	1
710				
4c	(Code: ) (Expenses \$	including grants of \$	) (Revenue \$	)
4d	Other program services (Describe in	Schedule O.)		
	(Expenses \$ includin	g grants of \$ ) (Revenue	\$	
4e	Total program service expenses ▶		-	

Part	V Checklist of Required Schedules			
			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A	1		v
2	Is the organization required to complete Schedule B, Schedule of Contributors (see instructions)?	2		~
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		~
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect during the tax year? If "Yes," complete Schedule C, Part II	4		,
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5	~	
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	6		,
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		,
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III	8		,
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for amounts not listed in Part X; or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV	9		,
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		,
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X as applicable.			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI	11a		,
b	Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b	,	
С	Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		/
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		~
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e		~
f	Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f		/
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI and XII	12a		~
b	Was the organization included in consolidated, independent audited financial statements for the tax year? If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b		/
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		~
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a	~	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000 or more? If "Yes," complete Schedule F, Parts I and IV.	14b		>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any foreign organization? If "Yes," complete Schedule F, Parts II and IV	15		~
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV.	16		~
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I (see instructions)	17		~
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II.	18		>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a?  If "Yes," complete Schedule G, Part III	19		/
20 a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		~
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return? .	20b		~
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		/

	Checklist of Required Schedules (continued)		· · · · · · · · · · · · · · · · · · ·	
00	Did the second s		Yes	No
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		~
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete Schedule J	23		,
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete Schedule K. If "No," go to line 25a	24a		,
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		1
C	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		,
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		~
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		,
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete Schedule L, Part I	25b		,
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes," complete Schedule L, Part II	26	•	
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member of any of these persons? If "Yes," complete Schedule L, Part III	27		,
28	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions):			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	~	ļ
b	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		,
С	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer, director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c	,	
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29		~
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? If "Yes," complete Schedule M	30		v
31	Did the organization liquidate, terminate, or dissolve and cease operations? If "Yes," complete Schedule N, Part I	31		~
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete Schedule N, Part II	32		~
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? If "Yes," complete Schedule R, Part I	33		~
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and Part V, line 1	34		~
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a		~
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b		~
36	<b>Section 501(c)(3) organizations.</b> Did the organization make any transfers to an exempt non-charitable related organization? If "Yes," complete Schedule R, Part V, line 2	36		~
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		~
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19? <b>Note.</b> All Form 990 filers are required to complete Schedule O.	38	,	
Part				_
	Check if Schedule O contains a response or note to any line in this Part V	• •	Yes	No
1a	Enter the number reported in Box 3 of Form 1096. Enter -0- if not applicable   1a			
b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1		
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?	1c		_

Form **990** (2018)

Part V Statements Regarding Other IRS Filings and Tax Compliance (continued)							
T GI C	Cutefficial regarding outer file runings and rux compilation (continues)		Yes	No			
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax			-			
20	Statements, filed for the calendar year ending with or within the year covered by this return 2a 0						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns? .	2b					
_	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		1			
b	If "Yes," has it filed a Form 990-T for this year? If "No" to line 3b, provide an explanation in Schedule O.	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over,						
-	a financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		~			
b	If "Yes," enter the name of the foreign country: ▶						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR).						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		1			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b		~			
C	If "Yes" to line 5a or 5b, did the organization file Form 8886-T?	5c					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the						
	organization solicit any contributions that were not tax deductible as charitable contributions?	6a		~			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or			1			
	gifts were not tax deductible?	6b	<u> </u>	~			
7	Organizations that may receive deductible contributions under section 170(c).						
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods			<u> </u>			
	and services provided to the payor?	7a		~			
b	If "Yes," did the organization notify the donor of the value of the goods or services provided?	7b		ļ			
C	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was	l _ <sup>1</sup>					
	required to file Form 8282?	7c		~			
đ	If "Yes," indicate the number of Forms 8282 filed during the year	<u> </u>					
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>			
f	Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? .	7f		<b>V</b>			
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g		7			
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h		·			
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the	8		<u>,                                    </u>			
0	sponsoring organization have excess business holdings at any time during the year?	┝		<del>                                     </del>			
9	Did the sponsoring organization make any taxable distributions under section 4966?	9a		7			
a b	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b		1			
10	Section 501(c)(7) organizations. Enter:			<u> </u>			
а	Initiation fees and capital contributions included on Part VIII, line 12	-					
b	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities . 10b						
11	Section 501(c)(12) organizations. Enter:						
а	Gross income from members or shareholders						
b	Gross income from other sources (Do not net amounts due or paid to other sources						
	against amounts due or received from them.)		L	_			
12a	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a		~			
b	If "Yes," enter the amount of tax-exempt interest received or accrued during the year 12b						
13	Section 501(c)(29) qualified nonprofit health insurance issuers.						
а	Is the organization licensed to issue qualified health plans in more than one state?	13a		~			
	Note. See the instructions for additional information the organization must report on Schedule O.						
b	Enter the amount of reserves the organization is required to maintain by the states in which						
	the organization is licensed to issue qualified health plans						
C	Enter the amount of reserves on hand	igsqcut					
14a	Did the organization receive any payments for indoor tanning services during the tax year?	14a		<u> </u>			
b	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O.	14b		<u> </u>			
15	Is the organization subject to the section 4960 tax on payment(s) of more than \$1,000,000 in remuneration or						
	excess parachute payment(s) during the year?	15	L	~			
	If "Yes," see instructions and file Form 4720, Schedule N.			لــــا			
16	Is the organization an educational institution subject to the section 4968 excise tax on net investment income?	16		~			
	If "Yes." complete Form 4720, Schedule O.	1 1		ı i			

Part	Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. S. Check if Schedule O contains a response or note to any line in this Part VI	es in Schedule O. See instructio					
Socti	on A. Governing Body and Management	<del></del>	•				
Secu	on A. Governing body and management		Yes	No			
. 1a	Enter the number of voting members of the governing body at the end of the tax year   1a   5			1			
	If there are material differences in voting rights among members of the governing body, or if the governing body delegated broad authority to an executive committee or similar committee, explain in Schedule O.						
b	Enter the number of voting members included in line 1a, above, who are independent . 1b 4			l i			
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		_			
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors, or trustees, or key employees to a management company or other person?	3		v			
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		~			
5	Did the organization become aware during the year of a significant diversion of the organization's assets? .	5		~			
6	Did the organization have members or stockholders?	6	~				
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or more members of the governing body?	7a	1				
b	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or persons other than the governing body?	7b		~			
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:						
а	The governing body?	8a	۷				
b	Each committee with authority to act on behalf of the governing body?	8b		~			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? <i>If "Yes," provide the names and addresses in Schedule O</i> .	9		,			
Secti	on B. Policies (This Section B requests information about policies not required by the Internal Rever	ue C	ode.)				
			Yes	No			
10a	Did the organization have local chapters, branches, or affiliates?	10a		~			
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with the organization's exempt purposes?	10b					
11a	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	~	<u> </u>			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990.			<u> </u>			
12a	Did the organization have a written conflict of interest policy? If "No," go to line 13	12a	~	<u> </u>			
b	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	~				
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this was done	12c		v			
13	Did the organization have a written whistleblower policy?	13		~			
14	Did the organization have a written document retention and destruction policy?	14		•			
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?						
a	The organization's CEO, Executive Director, or top management official	15a		<u> </u>			
b	Other officers or key employees of the organization	15b					
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a	~				
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's exempt status with respect to such arrangements?	16b					
Secti	on C. Disclosure						
17	List the states with which a copy of this Form 990 is required to be filed ▶ WA DC						
18	Section 6104 requires an organization to make its Forms 1023 (1024 or 1024-A if applicable), 990, and 990-(3)s only) available for public inspection. Indicate how you made these available. Check all that apply.  Own website   Other (explain in Schedule O)						
19	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of int financial statements available to the public during the tax year.			, and			
20	State the name, address, and telephone number of the person who possesses the organization's books and re Brock Pierce, 1090 Vermont Ave, NW, Washington DC, 20005 c/o The Bitcoin Foundation (650) 772-0551	cords					

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Page	

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Part VI	Compensation of Officers, Directors, Trustees, Key Employees	s, Highes	t Compensated	<b>Employees</b>	, and
	Independent Contractors				

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

1a Complete this table for all persons required to be listed. Report compensation for the calendar year ending with or within the organization's tax year.

- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation. Enter -0- in columns (D), (E), and (F) if no compensation was paid.
  - List all of the organization's current key employees, if any. See instructions for definition of "key employees."
- List the organization's five **current** highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's **former** officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations.
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations.

List persons in the following order: individual trustees or directors; institutional trustees; officers; key employees; highest compensated employees; and former such persons.

Check this box if neither the organization nor any related organization compensated any current officer, director, or trustee.

Check this box if neither the organization no	r any related	a org	anız			ompe	risa	ted any curren	t officer, director	r, or trustee.
					C)					
(A)	(B)	(do n	ot ch		ntion	than o	nne.	(D)	(E)	(F)
Name and Title	Average					is both		Reportable	Reportable	Estimated
	hours per	office	erand			or/trust		compensation from	compensation from related	amount of other
	week (list any hours for	악중	l l	Officer	₽	૱	Former	the	organizations	compensation
	related	d Z	<u></u>	ic e	y er	Ples	]	organization	(W-2/1099-MISC)	from the
	organizations below dotted	용교	ğ	Ì .	Key employee	8 8	"	(W-2/1099-MISC)		organization and related
	line)	] ž	a :		ye	Ě				organizations
	1	Individual trustee or director	Institutional trustee	1	"	B			,	, and the second
			8			Highest compensated employee				
				T	<b>-</b>	-				
(1) Llewellyn Claasen										
Executive Director	10			~				0	0	0
(2) Brock Plerce										
Chairman	.5	~					L	0	0	0
(3) Bruce Fenton	ļ			ŀ						
Board Member	.5	~		L_		<b>.</b>		0	0	0
(4) Vinny Lingham										
Board Member	.5	~			L.	ļ		0	0	0
(5) Michael Perklin	<b></b>									i
Board Member	.5	~		L.	_		L	0	0	0
	<b></b>									
(7)				<b></b>			<u> </u>			
			L			ļ				
(8)										
			<u> </u>	├—		<u> </u>	-			
(9)										
(10)			-	├─	$\vdash$					
(10)	<b>†</b>									
(11)										
		-		<u> </u>	-	ļ	<u> </u>			
(12)	<del> </del>									
(13)	<b>!</b>									
			ļ	<u> </u>	ļ	ļ	<u> </u>			
(14)	<b></b>									
			l	l	l	l :	1	F	J	

Part	Part VII Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees (continued)													
	(A)	(B)	(40.00	a4 ab	Pos	c) ition			(D)	(E)			(F)	
	Name and title	Average hours per	box,	unles	s pe	rson	than one of the state of the st	an	Reportable compensation	Reportable compensation from			mated	
		week (list any hours for			Officer			Former	from the	related organizations		comp	ther ensati	on
		related organizations	יים ו	Institutional trustee	Ger	Key employee	Highest compensated employee	ner	organization (W-2/1099-MISC)	(W-2/1099-MIS	3)	orga	m the nizatio	
		below dotted line)	truste	al trus		byee	mpen						related	
			rō	tee			sated							
(15)														
(16)										-				
(17)			 											
(18)					<del>                                     </del>									
					_	_					_			
(20)														
(21)														
(22)														
(23)														
(24)														
(25)					-									
1b	Sub-total	<u> </u>	L	ليا	<u> </u>		L	<u> </u>			-			
C	Total from continuation sheets to Part	VII, Sectio						<b>&gt;</b>			-			
d	Total (add lines 1b and 1c)	t not limited						e) w	ho received mo	ore than \$100	,000 d	of	<u>.</u> . <u></u>	
									James or burb		d		Yes	No
3	Did the organization list any former of employee on line 1a? If "Yes," complete											3		~
4	For any individual listed on line 1a, is the organization and related organizations													
_	ındıvıdual											4		~
5	Did any person listed on line 1a receive of for services rendered to the organization									ation or indivi	duai 	5		V
	on B. Independent Contractors										100	200 -6		
1	Complete this table for your five highest compensation from the organization. Repyear.													ax
	(A) Name and business add	Iress							(B) Description of s	ervices	C	(C) ompens	ation	
		<del></del>										_		
2	Total number of independent contractor	•	-					th	ose listed abo	ove) who				

Pan	VIII	Statement of Revenue			Da. 4 \ //U		
		Check if Schedule O contains a re	sponse or note to	(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512–514
ts	1a	Federated campaigns 1a		-			
ran Jun	b	Membership dues 1b					
s, G	С	Fundraising events	;				
Sifts ar /	d	Related organizations 10	1				
s, ( imil	е	Government grants (contributions) 16					
Contributions, Gifts, Grants and Other Similar Amounts	f	All other contributions, gifts, grants, and similar amounts not included above	117,011				] .
중달	_	Noncash contributions included in lines 1a–1f: \$					
Son	g	Total. Add lines 1a-1f		112,011			
	- ''	Total. Add lines 1a-11	Business Code	112,011			
enn	2a	Membership Dues	900099	17,040	17,040		† <del>-</del>
Rev	b		-		,		
ce	c		, <u> </u>				
er.	d		-				
E	е		1				
Program Service Revenue	f	All other program service revenue.					
Pro	g	Total. Add lines 2a-2f	•				
	3	Investment income (including div					
		and other similar amounts)		0	0		
	4	Income from investment of tax-exempt					
	5	Royalties	<b>.</b>				
	_	(i) Real	(ii) Personal				
	6a	Gross rents					
	b	Less: rental expenses					[
	C .	Rental income or (loss)	•				
	d	Net rental income or (loss)	(H) Other				
	7ล	Gross amount from sales of assets other than inventory	(1) 0 1 10				
	b	Less: cost or other basis					
	С	and sales expenses .  Gain or (loss)					
	d		▶		-		1
Ð							
Other Revenue	8a	Gross income from fundraising events (not including \$					
Re		of contributions reported on line 1c). See Part IV, line 18			:		'
the			. ————				]
ō		Less: direct expenses	<b>b</b> a events . ▶				
		Gross income from gaming activities.					1
	"-	See Part IV, line 19					]
	b		ь				
		Net income or (loss) from gaming ac	ctivities >				
		Gross sales of inventory, less returns and allowances					
	b	Less, cost of goods sold	b				j
		Net income or (loss) from sales of in	ventory ►				
		Miscellaneous Revenue	Business Code				
	11a						
	b						
	C						
	d	All other revenue					
	е	Total. Add lines 11a-11d				· · · · · · · · · · · · · · · · · · ·	<u> </u>
	12	Total revenue. See instructions .	<u>.</u> •	129,051	17,040		

Form 99	90 (2018)				Page 10				
Part	IX Statement of Functional Expenses								
Sectio	n 501(c)(3) and 501(c)(4) organizations must com	plete all columns. A	ll other organization	ns must complete co	olumn (A).				
Check if Schedule O contains a response or note to any line in this Part IX									
	t include amounts reported on lines 6b, 7b, , and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	( <b>D)</b> Fundraising expenses				
1	Grants and other assistance to domestic organizations and domestic governments. See Part IV, line 21								
2	Grants and other assistance to domestic individuals. See Part IV, line 22								
3	Grants and other assistance to foreign organizations, foreign governments, and foreign individuals. See Part IV, lines 15 and 16								
<b>4</b> <b>5</b>	Benefits paid to or for members Compensation of current officers, directors, trustees, and key employees				1				
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)								
7 8	Other salaries and wages								
9	Other employee benefits	35							
10	Payroll taxes	-17							
11	Fees for services (non-employees):								
а	Management	53,044							
b	Legal	5,272							
C	Accounting	1,100							
d	Lobbying								
е	Professional fundraising services. See Part IV, line 17								
f g	Investment management fees Other. (If line 11g amount exceeds 10% of line 25, column (A) amount, list line 11g expenses on Schedule O.)				<u> </u>				
40	• • • • • • • • • • • • • • • • • • • •	885	-						
12	Advertising and promotion	3,223							
13 14	Office expenses	3,299							
15	Royalties	0,233							
16	Occupancy								
17	Travel	16,488							
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	10,100							
19	Conferences, conventions, and meetings .								
20	Interest								
21	Payments to affiliates								
22	Depreciation, depletion, and amortization .		· · · · · · · · · · · · · · · · · · ·		<u> </u>				
23	Insurance								
24	Other expenses. Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column								
	(A) amount, list line 24e expenses on Schedule O.)								
а									
b									
C									
d									
e	All other expenses								
25	Total functional expenses. Add lines 1 through 24e	83,328							
26	Joint costs. Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation. Check here   If following SOP 98-2 (ASC 958-720)								

Form 990 (2018) Page **11** Part X Balance Sheet Check if Schedule O contains a response or note to any line in this Part X (B) End of year Beginning of year 1,069 1,967 1 Cash-non-interest-bearing 2 2 Savings and temporary cash investments . . 0 3 3 Pledges and grants receivable, net . . . . . 0

	3	Pledges and grants receivable, net	U	ာ	U
	4	Accounts receivable, net	0	4	0
		·	<u>-</u>	-	1
-	5	Loans and other receivables from current and former officers, directors,	1		
		trustees, key employees, and highest compensated employees.			
		Complete Part II of Schedule L		5	
	_	·	<del></del>		i
	6	Loans and other receivables from other disqualified persons (as defined under section			
		4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing employers and			
		sponsoring organizations of section 501(c)(9) voluntary employees' beneficiary			
		organizations (see instructions). Complete Part II of Schedule L	0	6	
*					0
Assets	7	Notes and loans receivable, net	j 0]	7	0
ĕ	8	Inventories for sale or use	0	8	0
			0	9	0
	9	Prepaid expenses and deferred charges			
	10a	Land, buildings, and equipment: cost or			
		other basis. Complete Part VI of Schedule D   10a			
		· · · · · · · · · · · · · · · · · · ·		10c	
	b	· · · · · · · · · · · · · · · · · · ·	<del>                                     </del>		
	11	Investments—publicly traded securities	0	11	0
	12	Investments—other securities. See Part IV, line 11	14,155	12	23,373
			0	13	0
	13	Investments—program-related. See Part IV, line 11			<u>_</u>
	14	Intangible assets	0	14	0
	15	Other assets. See Part IV, line 11	0	15	0
			16,122		24,442
	16	Total assets. Add lines 1 through 15 (must equal line 34)		_	
	17	Accounts payable and accrued expenses	51,540	17	79,658
	18	Grants payable	O	18	0
		Deferred revenue	0	19	0
	19		<u> </u>		<del></del>
	20	Tax-exempt bond liabilities	0	20	0
	21	Escrow or custodial account liability. Complete Part IV of Schedule D.	0	21	0
<b>/</b> A		· · · · · · · · · · · · · · · · · · ·			1
<u>ĕ</u>	22	Loans and other payables to current and former officers, directors,	1		
≝		trustees, key employees, highest compensated employees, and			
چَ		disqualified persons. Complete Part II of Schedule L	10,292	22	10,292
Liabilities	22		0	23	0
_	23	Secured mortgages and notes payable to unrelated third parties	·		
	24	Unsecured notes and loans payable to unrelated third parties	0	24	0
	25	Other liabilities (including federal income tax, payables to related third			
		parties, and other liabilities not included on lines 17–24). Complete Part X			
					_
		of Schedule D	-18	25	0
	26	Total liabilities. Add lines 17 through 25	61,814	26	89,950
_	· · · · · ·	Organizations that follow SFAS 117 (ASC 958), check here ▶ □ and			
Ś			i		
ဗ		complete lines 27 through 29, and lines 33 and 34.			
ances	27	Unrestricted net assets	-45,692	27	-65,508
	28	Temporarily restricted net assets	0	28	0
8					-
5	29	Permanently restricted net assets	0	29	0
جَ		Organizations that do not follow SFAS 117 (ASC 958), check here ▶ ☑ and			
Ī		complete lines 30 through 34.			
0	00	•	<u> </u>		
봒	30	Capital stock or trust principal, or current funds	0	30	0
Ä	31	Paid-in or capital surplus, or land, building, or equipment fund	0	31	0
74	32	Retained earnings, endowment, accumulated income, or other funds .	0	32	0
As		ricianica carrings, endownicht, accumulated income, or other fallas.			
et As		Tatal and another or found belonger	45 000		
Net Assets or Fund Ba	33	Total net assets or fund balances	-45,692	_	-65,508
Net As		Total net assets or fund balances	-45,692 16,122	_	-65,508 24,442 Form <b>990</b> (2018)

Page	1	2

	Form	990	(201	8)
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Theck if Schedule O contains a response or note to any line in this Part XI  1 Total revenue (must equal Part VIII, column (A), line 12)	Par	XI Reconciliation of Net Assets				<u> </u>
1 Total revenue (must equal Part VIII, column (A), line 12). 2 83,328 2 Total expenses (must equal Part IX, column (A), line 25). 2 83,328 3 Revenue less expenses. Subtract line 2 from line 1 3 4,5723 4 Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A)). 4 45,692 5 Net unrealized gains (losses) on investments 5 46,539 6 Donated services and use of facilities 6 7 Investment expenses 7 7 8 8 Prior period adjustments 8 7 7 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9 9						. 🗆
Revenue less expenses. Subtract line 2 from line 1  Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))  Net unrealized gains (losses) on investments  Net unrealized gains (losses) on investments  Donated services and use of facilities  Investment expenses  Prior period adjustments  Prior period adjustments  Net assets or fund balances (explain in Schedule O)  Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))  Part XII Financial Statements and Reporting  Check if Schedule O contains a response or note to any line in this Part XII  Accounting method used to prepare the Form 990: Cash Accrual Other  If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  Were the organization's financial statements compiled or reviewed by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis Consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes," theck a box below to indicate whether the financial statements for the year were audited on a separate basis Consolidated basis and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  If "Yes," did the organization undergo the required audit or audits, explain why in Schedule O and describe any steps taken to u	1					29,051
Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	2	Total expenses (must equal Part IX, column (A), line 25)	2		1	33,328
5 Net unrealized gains (losses) on investments 5 6 -65,538 6 Donated services and use of facilities 6 7 Investment expenses 7 8 Prior period adjustments 8 9 Other changes in net assets or fund balances (explain in Schedule O) 9 10 Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B)) -65,508  Part XII Financial Statements and Reporting Check if Schedule O contains a response or note to any line in this Part XII	3	Revenue less expenses. Subtract line 2 from line 1	3		-	45,723
Donated services and use of facilities   Financial statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII   Financial Statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII   Financial Statements and Reporting   Check if Schedule O contains a response or note to any line in this Part XII   Financial Statements and Reporting   Yes   No	. 4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4		-4	45 <u>,</u> 692
7   Investment expenses	5	Net unrealized gains (losses) on investments	5		-(	55,539
8 Prior period adjustments	6	Donated services and use of facilities	6			
9 Other changes in net assets or fund balances (explain in Schedule O)	7	Investment expenses	7			
Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line 33, column (B))    The column (B)   The column (B)   The column (B)	8	Prior period adjustments	-			
33, column (B))	9	Other changes in net assets or fund balances (explain in Schedule O)	9			
Check if Schedule O contains a response or note to any line in this Part XII	10	Net assets or fund balances at end of year. Combine lines 3 through 9 (must equal Part X, line				
Check if Schedule O contains a response or note to any line in this Part XII		33, column (B))	10		(	55 <u>,</u> 508
Accounting method used to prepare the Form 990:  Accrual  Accrual  Accounting method used to prepare the Form 990:  Accrual  Accr	Part	·				
1 Accounting method used to prepare the Form 990:		Check if Schedule O contains a response or note to any line in this Part XII	<u> </u>	<u> </u>	<u> </u>	<u>.                                     </u>
If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?					Yes	No
Schedule O.  2a Were the organization's financial statements compiled or reviewed by an independent accountant?	1			_		1 1
Were the organization's financial statements compiled or reviewed by an independent accountant?			plain	in	1	} '
If "Yes," check a box below to indicate whether the financial statements for the year were compiled or reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?				<u></u>	-	لـــــــــــــــــــــــــــــــــــــ
reviewed on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	2a	·		· <del> </del>	ļ	~
Separate basis ☐ Consolidated basis ☐ Both consolidated and separate basis  b Were the organization's financial statements audited by an independent accountant?		·	piled (	or		
b Were the organization's financial statements audited by an independent accountant?  If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?  b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.		·		j		)
If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		— ·		<u> </u>	-	اـــا
separate basis, consolidated basis, or both:  Separate basis Consolidated basis Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	b			·	<del> </del>	<b>'</b>
□ Separate basis □ Consolidated basis □ Both consolidated and separate basis  c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		·	ed on	a		
c If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		·				
of the audit, review, or compilation of its financial statements and selection of an independent accountant?  If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?					·	<b>├</b> -
If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?	C					
Schedule O.  3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		·			+	<u>'</u>
<ul> <li>3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?</li></ul>			plain	in		
the Single Audit Act and OMB Circular A-133?	_			.	-	.
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.  3b	3a		torth			
required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits.	L	•			+-	-
	Ď					1
		required addit of addits, explain why in schedule O and describe any steps taken to undergo such a	uuits.		QQ(	) (2019)

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#### **SCHEDULE C** (Form 990 or 990-EZ)

## **Political Campaign and Lobbying Activities**

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service

For Organizations Exempt From Income Tax Under section 501(c) and section 527

▶ Complete if the organization is described below. ▶ Attach to Form 990 or Form 990-EZ. ► Go to www.irs.gov/Form990 for instructions and the latest information.

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations: Complete Parts I-A and B. Do not complete Part I-C.
- Section 501(c) (other than section 501(c)(3)) organizations: Complete Parts I-A and C below. Do not complete Part I-B.
- Section 527 organizations: Complete Part I-A only.

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)): Complete Part II-A. Do not complete Part II-B.
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)): Complete Part II-B. Do not complete Part II-A.

	see separate instructions), t	s," on Form 990, Part IV, line 5 (Prox) hen	/ rax) (see separau	e instructions) or Form 990	J-EZ, Part V, line 35c (Proxy
• Se	ection 501(c)(4), (5), or (6) orga	anızatıons: Complete Part III.			
Name	of organization			Employer ide	ntification number
The B	tcoin Foundation			_	46-1671796
Part	I-A Complete if the	e organization is exempt und	er section 501(	c) or is a section 527	organization.
1	definition of "political car Political campaign activit	ty expenditures (see instructions) .		<b></b> .	t IV. (see instructions for
3		cal campaign activities (see instruc			·_ ·-
Part		e organization is exempt und			· · · · · · · · · · · · · · · · · · ·
1		excise tax incurred by the organiza		. 1000	. <u></u>
2		excise tax incurred by organization	-		
3		ed a section 4955 tax, did it file Fo	rm 4720 for this ye	ear?	Yes No
4a	Was a correction made?				LYes LNo
b	If "Yes," describe in Part			· · · · · · · · · · · · · · · · · · ·	
Part		e organization is exempt und			(c)(3).
1 2 3	activities	filing organization's funds contributions	outed to other org	▶ \$  anizations for section	3 3 
4	Did the filing organization	n file Form 1120-POL for this year	?		. Yes No
5	organization made payme the amount of political co	ses and employer identification nur ents. For each organization listed, ontributions received that were pro fund or a political action committe	enter the amount property	paid from the filing organ delivered to a separate p	ization's funds. Also enter political organization, such
	(a) Name	(b) Address	(c) EIN	(d) Amount paid from filing organization's funds. If none, enter -0	(e) Amount of political contributions received and promptly and directly delivered to a separate political organization.  If none, enter -0-
(1)					
(2)					
(3)					
(4)					
(5)					
(6)					

P	art II	-A	Complete if the organization section 501(h)).	n is exempt	under section 5	01(c)(3) and file	d Form 5768 (ele	ction under
A	Che	ck I	if the filing organization belor address, EIN, expenses, and				iliated group memb	er's name,
В	Che	ck 🖡	► ☐ if the filing organization chec	ked box A and	"limited control" p	rovisions apply.		
			Limits on Lob (The term "expenditures" m	bying Expendi	tures		(a) Filing organization's totals	(b) Affiliated group totals
_	1a -	Total	lobbying expenditures to influence				1	······
			lobbying expenditures to influence	•		•	<del></del>	
			lobbying expenditures (add lines 1	•	• •	•-		
			r exempt purpose expenditures .	•			· · · ·	
			exempt purpose expenditures (ad					
			ying nontaxable amount. Enter		•			·
		colur		ine amount	irom the lonowing	y lable iii bolii		
			amount on line 1e, column (a) or (b) is	The lobbying	nontaxable amoun	t is:		
			ver \$500,000		mount on line 1e.	113.		
			\$500,000 but not over \$1,000,000		s 15% of the excess	over \$500,000		
			\$1,000,000 but not over \$1,500,000		s 10% of the excess		1	
			\$1,500,000 but not over \$17,000,000		s 5% of the excess of			
			\$17,000,000	\$1,000,000.	0 0 70 01 010 020000	101 \$1,000,000.		
_			sroots nontaxable amount (enter 2					
	_		ract line 1g from line 1a. If zero or l	•				· · · · · · · · · · · · · · · · · · ·
			ract line 1f from line 1c. If zero or le					
			ere is an amount other than zero	•	1h or line 1i. dic	the organization	file Form 4720	
			ting section 4911 tax for this year	_		-		Yes No
		(So	me organizations that made a se See the	ction 501(h) el e separate inst	ructions for lines	e to complete all 2a through 2f.)	of the five column	s below.
_			Lobbying	g Expenditure:	During 4-Year A	veraging Period	1	
		Ca	llendar year (or fiscal year beginning in)	(a) 2015	<b>(b)</b> 2016	(c) 2017	(d) 2018	(e) Total
- 2	2a L	obb	ying nontaxable amount					
			ying ceiling amount % of line 2a, column (e))					
	c 1	Total	lobbying expenditures					
	d (	Gras	sroots nontaxable amount					
			sroots ceiling amount % of line 2d, column (e))					
	f (	aras:	sroots lobbying expenditures				1	

Schedule C (Form 990 or 990-EZ) 2018

Part II-B

	(election under section 501(h)).					
For A	each "Yes," response on lines 1a through 1i below, provide in Part IV a detailed	(;	a)		(b)	
	ription of the lobbying activity.	Yes	No	A	noun	t
1	During the year, did the filing organization attempt to influence foreign, national, state, or local legislation, including any attempt to influence public opinion on a legislative matter or referendum, through the use of:					
а	Volunteers?			]		
b	Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?			i		
C	Media advertisements?					
d	Mailings to members, legislators, or the public?					
е	Publications, or published or broadcast statements?					
f	Grants to other organizations for lobbying purposes?					
9	Direct contact with legislators, their staffs, government officials, or a legislative body?					
h	Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?			ļ		
i	Other activities?					
j	Total. Add lines 1c through 1i					
2a	Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?	<u> </u>				
þ	If "Yes," enter the amount of any tax incurred under section 4912					
C	If "Yes," enter the amount of any tax incurred by organization managers under section 4912 .					
d	If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?	<u></u>		L		
Part	III-A Complete if the organization is exempt under section 501(c)(4), section 501(c	)(5), d	or se	ction		
	501(c)(6).					·
					Yes	No
1	Were substantially all (90% or more) dues received nondeductible by members?		•	1	~	<u> </u>
2	Did the organization make only in-house lobbying expenditures of \$2,000 or less?		٠ ,	2	~	
3	Did the organization agree to carry over lobbying and political campaign activity expenditures from the					
rai	III-B Complete if the organization is exempt under section 501(c)(4), section 501(c 501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answered "No," O answered "Yes."				line (	3, is
1	Dues, assessments and similar amounts from members		1			
2	Section 162(e) nondeductible lobbying and political expenditures (do not include amounts political expenses for which the section 527(f) tax was paid).	of		_		
а	Current year		2a			
b	Carryover from last year		2b			
C	Total		2c			
3	Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues .		3			
4	If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of					
	excess does the organization agree to carryover to the reasonable estimate of nondeductible lobb					
	and political expenditure next year?		4			
5	Taxable amount of lobbying and political expenditures (see instructions)		5			
Par	IV Supplemental Information					-
	de the descriptions required for Part I-A, line 1; Part I-B, line 4; Part I-C, line 5; Part II-A (affiliated gro instructions); and Part II-B, line 1. Also, complete this part for any additional information.	up list	i); Par	t II-A, li	nes 1	and
				<b></b> -		<b>-</b>
		<b></b>				
						<b></b> -

Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768

	chedule C (Form 990 or 990-EZ) 2018 Page <b>4</b>								
Part IV	Supplemental Information (continued)								
,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,									

## **SCHEDULE M** (Form 990)

**Noncash Contributions** 

OMB No. 1545-0047

Open to Public Inspection

Department of the Treasury Internal Revenue Service Name of the organization

THE BITCOIN FOUNDATION

▶ Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30. ► Attach to Form 990.

▶ Go to www.irs.gov/Form990 for instructions and the latest information.

**Employer identification number** 

46-1671796

Part	Types of Property							
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method o			•
1	Art—Works of art			1 om 550, rur viii, inc rg	<u> </u>	-		
2	Art—Historical treasures							
3	Art—Fractional interests							
4	Books and publications				····			
5	•				<u> </u>			
3	Clothing and household goods	,						
			·		<u> </u>			
6	Cars and other vehicles	ļ			ļ			
7	Boats and planes				<del></del>	-		
8	Intellectual property							
9	Securities—Publicly traded				<u> </u>			
10	Securities—Closely held stock .	ļi						
11	Securities—Partnership, LLC, or trust interests							
12	Securities - Miscellaneous							
13	Qualified conservation							
	contribution—Historic structures	[						
14	Qualified conservation							
17	contribution—Other							- <u></u>
15	Real estate — Residential							
16	Real estate—Commercial							
17	Real estate—Other							
18	Collectibles							
19	Food inventory							
20	Drugs and medical supplies							
21	Taxidermy							
22	Historical artifacts							
23	Scientific specimens							
24	Archeological artifacts							
25	Other ► ( ETHEREUM )	•	1	100,000	MARKET VAI	_UE		
26	Other ► ()							
27	Other ► ()	-						
28	Other ► (							
29	Number of Forms 8283 received							
	which the organization completed	Form 8283	i, Part IV, Donee Acknowled	dgement	29			
							Yes	No
30a	During the year, did the organizat	tion receive	by contribution any prope	erty reported in Part I, lines	1 through			
	28, that it must hold for at least the							
	to be used for exempt purposes t	for the entir	e holding period?			30a	]	~
b	If "Yes," describe the arrangemen	t in Part II.						$\overline{}$
31	Does the organization have a	gift accer	tance policy that require	es the review of any no	onstandard			
		-				31		~
32a	Does the organization hire or use	e third part	ies or related organizations	s to solicit, process, or se	ll noncash			
	•	•		· •		32a		~
b	If "Yes," describe in Part II.							
33	If the organization didn't report an describe in Part II.	amount in	column (c) for a type of pro	perty for which column (a) i	s checked,			ļ

Part II	<b>Supplemental Information.</b> Provide the information required by Part I, lines 30b, 32b, and 33, and whether the organization is reporting in Part I, column (b), the number of contributions, the number of items received, or a combination of both. Also complete this part for any additional information.						
	or a combination of both. Also complete this part for any additional information.						

### SCHEDULE D (Form 990)

Department of the Treasury

Internal Revenue Service

**Supplemental Financial Statements** 

Complete if the organization answered "Yes" on Form 990, Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No. 1545-0047

Open to Public Inspection

**Employer identification number** Name of the organization 46-1671796 . The Bitcoin Foundation Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Part I Complete if the organization answered "Yes" on Form 990, Part IV, line 6. (a) Donor advised funds (b) Funds and other accounts Total number at end of year . . . . . . . 1 2 Aggregate value of contributions to (during year) 3 Aggregate value of grants from (during year) . 4 Aggregate value at end of year . . . . . . Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? . . . . . . . . . ☐ Yes ☐ No 6 Did the organization inform all grantees, donors, and donor advisors in writing that grant funds can be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose ☐ Yes ☐ No Part II Conservation Easements. Complete if the organization answered "Yes" on Form 990, Part IV, line 7. Purpose(s) of conservation easements held by the organization (check all that apply). ☐ Preservation of land for public use (e.g., recreation or education) ☐ Preservation of a historically important land area ☐ Preservation of a certified historic structure Protection of natural habitat ☐ Preservation of open space Complete lines 2a through 2d if the organization held a qualified conservation contribution in the form of a conservation Held at the End of the Tax Year easement on the last day of the tax year. Total acreage restricted by conservation easements . . . . . . . . . Number of conservation easements on a certified historic structure included in (a) . . . . Number of conservation easements included in (c) acquired after 7/25/06, and not on a Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the 3 Number of states where property subject to conservation easement is located ▶ 4 Does the organization have a written policy regarding the periodic monitoring, inspection, handling of 5 Staff and volunteer hours devoted to monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 6 Amount of expenses incurred in monitoring, inspecting, handling of violations, and enforcing conservation easements during the year 7 Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) 8 In Part XIII, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization's financial statements that describes the organization's accounting for conservation easements. Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Part III Complete if the organization answered "Yes" on Form 990, Part IV, line 8. If the organization elected, as permitted under SFAS 116 (ASC 958), not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide, in Part XIII, the text of the footnote to its financial statements that describes these items. b If the organization elected, as permitted under SFAS 116 (ASC 958), to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items: If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 (ASC 958) relating to these items: Assets included in Form 990, Part X .

3 Using the organization's acquisition, accession, and other records, check any of the following that are a significant use of its collection tems (check all that apply):  a	Par	Ull Organizations Maintaining	Collections of	Art, His	torical 1	reasures,	, or Oth	ner Similar As	sets (co	ntinued)
b   Scholarly research   e   Other	3			ther reco	rds, chec	k any of th	e follow	ing that are a s	ignificant	use of its
b   Scholarly research   e   Other	а	☐ Public exhibition		d	☐ Loan	or exchang	e progr	ams		
c	b	Scholarly research								
4 Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Par XIII.  5 During the year, did the organization solicit or receive donations of art, historical treasures, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?	С	<del>-</del>	s		_					
During the year, did the organization solicit or receive donations of art, historical treasurus, or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?    Port IV	4	Provide a description of the organiza		and expla	ain how t	hey further	the orga	anization's exen	npt purpo	se in Part
assets to be sold to raise funds rather than to be maintained as part of the organization's collection?   Part IV   Escrow and Custodial Arrangements.  Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Is the organization an agent, frustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?    b If "Yes," explain the arrangement in Part XIII and complete the following table:  C Beginning balance    d Additions during the year    e Distributions    Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Part V	5		solicit or receive	donation	s of art	historical tr	easi ires	or other simils	or .	
Complete if the organization answered "Yes" on Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.  Ia Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?		assets to be sold to raise funds rathe	r than to be mainta							s 🗌 No
990, Part X, line 21.  Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  Beginning balance  Beginning balance  Amount  Beginning balance  Amount  Combine by Early Beginning the year  Board organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability? Yes No by If "Yes," explain the arrangement in Part XIII. Check here if the explanation has been provided on Part XIII.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.  Beginning of year balance  Contributions  Contributions  Net investment earnings, gains, and losses  Grants or scholarships  Contributions  Net investment earnings, gains, and losses  Frovide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  Board designated or quasi-endowment ▶ %  Temporarily restricted endowment ▶ %  Describe in Part XIII the intended uses of the organization's isted as required on Schedule R?  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Ceasehold improvements  Goal Octor or other basis (6) Cost or other basis (6) Accomulated (7 phocoaltion of property (8) Easternerily (10 phocoaltion of property (10 phocoaltion of	Par			" on For	m 990 I	Part IV line	a Q orr	enorted an ar	nount on	Form
1a Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?  b If Yes, "explain the arrangement in Part XIII and complete the following table:  C Beginning balance			Tallowered Tes	0111 01	111 000, 1	art rv, mrc	, o, o, i	eported arran	iount on	Oilli
included on Form 990, Part X?    Yes   No	1a		custodian or oth	er intern	ediary fo	or contribut	ions or	other assets no	ot	
b If "Yes," explain the arrangement in Part XIII and complete the following table:    Amount										e $\square$ No
c Beginning balance	h	·							ie	3 <u>  110</u>
C Beginning balance		ii res, explain the arrangement in r	art Alli arid Comple	ete trie io	nownig te	abie.		T A	mount	
d Additions during the year    Ending balance   Distributions during the year   Tending balance   Tend	c	Reginning halance					10	<del> </del>		
Distributions during the year     1		-						<del></del>		
f Ending balance Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?							J			
Did the organization include an amount on Form 990, Part X, line 21, for escrow or custodial account liability?							-	<del>                                     </del>		
Part V Endowment Funds.  Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    Contributions								account liability	2   Ye	s 🗆 No
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Complete if the organization answered "Yes" on Form 990, Part IV, line 10.   Contributions										
Complete if the organization answered "Yes" on Form 990, Part IV, line 10.    a   Beginning of year balance   (a) Current year   (b) Prior year   (c) Two years back   (d) Three years back   (e) Four			urt Am. Oncok fich	C II die e	(piuriatio	THUS DECIT	provide	d on raic xiir .	· · ·	<del></del>
(a) Current year   (b) Pnor year   (c) Two years back   (d) Three years back   (e) Four years back   (d) Three years back   (e) Four years back   (e) Fo			answered "Yes'	" on For	m 990. F	Part IV. line	e 10.			
Beginning of year balance		,						(d) Three years back	(e) Four	ears back
b Contributions c Net investment earnings, gains, and losses d Grants or scholarships e Other expenditures for facilities and programs f Administrative expenses g End of year balance 2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations	1a	Beginning of year balance								·
c Net investment earnings, gains, and losses  d Grants or scholarships c Other expenditures for facilities and programs  f Administrative expenses g End of year balance  2 Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as: a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%. 3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by: (i) unrelated organizations (ii) related organizations b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?  4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment. Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Describtion of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation  1a Land b Buildings c Leasehold improvements d Equipment Cother Other Other	_									
d Grants or scholarships e Other expenditures for facilities and programs	С	Net investment earnings, gains, and								
e Other expenditures for facilities and programs	d								<del>                                     </del>	<del></del>
f Administrative expenses	-					·				
f Administrative expenses		•								
g End of year balance	f	· -							<del>                                     </del>	<del></del>
Provide the estimated percentage of the current year end balance (line 1g, column (a)) held as:  a Board designated or quasi-endowment ▶ %  b Permanent endowment ▶ %  The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations . 3a(i)   3a(i)    b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R? . 3b    4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (b) Cost or other basis (c) Accumulated depreciation (d) Book value depreciation buildings . (c) Leasehold improvements . (d) Equipment . (e) Cost or other basis (c) Accumulated depreciation buildings . (e) Leasehold improvements . (e) Equipment . (e) Cost or other basis (other) buildings . (e) Equipment . (e) Cost or other basis (other) buildings . (e) Equipment . (e) Equipment . (e) Equipment . (e) Equipment . (f) Equipment . (		·							<del>                                     </del>	
a Board designated or quasi-endowment ▶ % b Permanent endowment ▶ % c Temporarily restricted endowment ▶ % The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations . 3a(ii)   3	. •	-	the current vear en	d balanc	e (line 1a	. column (a)	)) held a	s:		
b Permanent endowment					- (	<b>,,</b>	,,			
Temporarily restricted endowment ► % The percentages on lines 2a, 2b, and 2c should equal 100%.  3a Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	b	Permanent endowment ►	%							
The percentages on lines 2a, 2b, and 2c should equal 100%.  Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations	С									
Are there endowment funds not in the possession of the organization that are held and administered for the organization by:  (i) unrelated organizations		•		00%.						
(i) unrelated organizations	За				zation tha	at are held a	and adn	ninistered for th	е	
(ii) related organizations		organization by:		_					Ţ,	res No
b If "Yes" on line 3a(ii), are the related organizations listed as required on Schedule R?		(i) unrelated organizations							3a(i)	
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (nivestment) (other) (other) (d) Book value (d) Book value (d) Book value (e) Cost or other basis (other)		(ii) related organizations							3a(ii)	
4 Describe in Part XIII the intended uses of the organization's endowment funds.  Part VI Land, Buildings, and Equipment.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property (a) Cost or other basis (other) (c) Accumulated depreciation (nivestment) (other) (other) (d) Book value (d) Book value (d) Book value (e) Cost or other basis (other)	b	If "Yes" on line 3a(ii), are the related of	rganizations listed	as requi	red on So	hedule R?			3b	
Complete if the organization answered "Yes" on Form 990, Part IV, line 11a. See Form 990, Part X, line 10.  Description of property  (a) Cost or other basis (b) Cost or other basis (other)  Land	4								·	
Description of property  (a) Cost or other basis (other)  (b) Cost or other basis (other)  (c) Accumulated depreciation  (d) Book value	Pari	VI Land, Buildings, and Equip	oment.							
(investment)         (other)         depreciation           1a Land             b Buildings             c Leasehold improvements             d Equipment             e Other		Complete if the organization	answered "Yes"	on For	m 990, F	Part IV, line	11a. S	ee Form 990,	Part X, lı	ne 10.
b Buildings		Description of property	1 ' '				• •		(d) Book	value
b Buildings	1a	Land		, -			·	+-		<del></del>
c Leasehold improvements d Equipment										
d Equipment		•							<del></del>	
e Other	_									
					· · · · · ·				,,	
Total. Add lines 1a through 1e. (Column (d) must equal Form 990, Part X, column (B), line 10c.) ▶	Total.			90, Part X	, column	(B), line 10	c.)	•		<del></del>

Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line (b) Method of valuables. (cost or end-of-year market value (cost or end-	Part VII	Investments—Other Securi		000 Port IV lin	- 11h Coo Form	000 Dark V line 10	
(1) Financial derivatives (2) Closely-held equity interests				T			
29 Closely-held equity interests				(b) Book value			
(3) Other	(1) Financial	derivatives					
A	(2) Closely-h	neld equity interests					
A	(3) Other				<u></u>		
Col.   Column   Col	(A) Bitcoin			2,174	End of Year Market	Value	
(i) (ii) (ii) (iii) (iii) (iii) (iiii) (iiii) (iiii) (iiiii) (iiiii) (iiiiii) (iiiiiii) (iiiiiiii	(B) Ethere	um		21,199	End of Year Market	Value	
(F) (G) (G) (G) (G) (G) (G) (G) (G) (G) (G	(C)						
(i) (ii) (iii) (iiii) (iiiiiiiiiiiiiiii	(D)						
(G) (H) Total. (Column (b) must equal form 990, Part X, cot. (B) line 12.) ▶    Part VIII   Investments — Program Related.	(E)						
Total, Column (b) must equal Form \$90, Part X, col. (B) line 12.) ▶   Part X   Investments — Program Related.	(F)						
Total. (Column (b) must equal Form 990, Part X, col. (B) line 12.)	(G)						
Investments	(H)						
Complete if the organization answered "Yes" on Form 990, Part IV, line 11c. See Form 990, Part X, line (a) Description of investment (b) Book value (c) Method of valuation:	Total. (Column (	b) must equal Form 990, Part X, col. (B) line 12	2.) ▶				
(a) Description of investment (b) Book value (c) Allethod of Valuabinic Cost or end-of-year market value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total, (Column (b) must equal Form \$90, Part X, col. (B) line 13.) ▶  Part X Other Case S.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line (a) Description (b) Book value (c) (c) (d) (d) (e) (e) (e) (e) (e) (f) (f) (f) (f) (f) (f) (f) (f) (f) (f	Part VIII	Investments-Program Rel	ated.				
(1) (2) (3) (4) (5) (6) (7) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9		Complete if the organization	answered "Yes" on For	rm 990, Part IV, lin	e 11c. See Form	990, Part X, line 13.	
23   (4)   (5)   (6)   (7)   (8)   (9)   (9)   (10)   (1		(a) Description of investme	ent	(b) Book value			
(6) (6) (7) (8) (9) Part IX Other Assets. Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line (9) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Part X Other Liabilities. Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part IV							
(6) (7) (8) (9) Total (Column (b) must equal Form 990, Part X, col. (β) line 13,    Part X  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line (a) Description  (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (β) line 15.)  Part X  Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part I ine 25.  1. (a) Description Form 990, Part X, col. (B) line 15.)  (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9) (7) (8) (9) (7) (8) (9) (1) Fodoral income taxes (9) (1) Fodoral income taxes (1) Fodoral income taxes (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (1) Fodoral income taxes (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (9) (1) Fodoral income taxes (1) Fodoral income taxes (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (7) (8) (9) (1) Fodoral income taxes (2) (3) (4) (4) (5) (6) (7) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (7) (8) (9) (9) (1) Fodoral income taxes (1) Fodoral income taxes (2) (3) (4) (4) (5) (6) (7) (6) (7) (8) (9) (9) (1) Fodoral income taxes (1) Fodoral income taxes (2) (3) (4) (4) (4) (5) (6) (7) (7) (8) (9) (9) (1) Fodoral income taxes (2) (3) (4) (4) (4) (5) (6) (7) (6) (7) (7) (8) (9) (7) (8) (9) (9) (1) Fodoral income taxes (1) Fodoral income taxes (2) (3) (4) (4) (5) (6) (6) (7) (7) (8) (9) (9) (1) Fodoral income taxes (1) Fodoral income taxes (2) Form 990, Part X, col. (B) line 25) (4) (5) (6) (7) (7) (8) (9) (7) (8) (9) (8) (8) (9) (8) (9) (9) (9) (9) (9) (9) (9) (9) (9) (9				<u> </u>			
(5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part III line 25.  1. (a) Description of liability (b) Book value  (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶							
(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line (a) Description (b) Book value (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part III, line 25.  1. (a) Description of liability (b) Book value (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	(4)						
(7)   (8)   (9)	(5)		· · · · · · · · · · · · · · · · · · ·		-		
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part Iline 25.  1. (a) Description of liability (b) Book value (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶	(6)						
[9] Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.) ▶  Part IX Other Assets.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line  (a) Description (b) Book value  (1) (2) (3) (4) (5) (6) (7) (8) (9)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part I ine 25.  1. (a) Description of liability (b) Book value  (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.) ▶				<u> </u>			
Total. (Column (b) must equal Form 990, Part X, col. (B) line 13.)   ▶	(8)			<u> </u>			
Other Assets.   Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line (a) Description (b) Book value (f) (2) (3) (4) (5) (6) (6) (7) (8) (9) (7) (8) (9) (7) (10) (10) (10) (10) (10) (10) (10) (10				ļ			
Complete if the organization answered "Yes" on Form 990, Part IV, line 11d. See Form 990, Part X, line  (a) Description (b) Book value  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Part X  Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part III ine 25.  1. (a) Description of liability (b) Book value  (1) Foderal income taxes (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)   (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25)			3.) >	<u> </u>		<del></del>	
(a) Description (b) Book value  (1)  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X  Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part line 25.  1. (a) Description of liability (b) Book value  (1) Fcdcral income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (t) must equal Form 990, Part X, col. (B) line 25.)  Total. (Column (t) must equal Form 990, Part X, col. (B) line 25.)	Part IX		1437 9 . 5.	000 David N/ Ca	. 44 4 0	000 Dark V line 15	
(1) (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X  Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part I line 25.  1. (a) Description of liability (b) Book value (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25.)  Total (Column (b) must equal Form 990, Part X, col. (B) line 25.)		Complete if the organization		rm 990, Part IV, IIn	e 11a. See Form		
(2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.) ▶  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part I line 25.  1. (a) Description of liability (b) Book value (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶			(a) Description			(b) Book value	
(3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part III in 25.  1. (a) Description of liability (b) Book value (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶							
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(6) (7) (8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)							
(7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)							
(8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part III. In a Description of liability (b) Book value (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25.) ▶							
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Total. (Column (b) must equal Form 990, Part X, col. (B) line 15.)  Part X Other Liabilities.  Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part I line 25.  1. (a) Description of liability (b) Book value  (1) Fodoral income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25) ▶	_(8)		<del> </del>				
Part X Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part I line 25.  1. (a) Description of liability (b) Book value  (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (b) must equal Form 990, Part X, col. (B) line 25 ) ▶	(9)	4)	) ( ( ( ( ) ( ) ( ) ( ) ( ) ( )				
Complete if the organization answered "Yes" on Form 990, Part IV, line 11e or 11f. See Form 990, Part I line 25.  1. (a) Description of liability (b) Book value  (1) Fodoral income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25)		1, 1,	X, col. (B) line 15.)	<del></del>	· · · · P		
1. (a) Description of liability (b) Book value  (1) Fodoral income taxes  (2)  (3)  (4)  (5)  (6)  (7)  (8)  (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 )	Part X		answered "Yes" on For	rm 990, Part IV, lin	e 11e or 11f. See	Form 990, Part X,	
(1) Fcdcral income taxes (2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 )		line 25.				<u> </u>	
(2) (3) (4) (5) (6) (7) (8) (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 )	1.	(a) Description of liability	(b) Book value				
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 )	(1) Fcdcral in	ncome taxes					
(3) (4) (5) (6) (7) (8) (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 )	(2)						
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(7) (8) (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 )							
(8) (9)  Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 )							
(9) Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 ) ▶							
Total. (Column (h) must equal Form 990, Part X, col. (B) line 25 ) ▶							
		b) must equal Form 990 Part X col. (R) line 25	5) 🕨				
2. Liability for uncertain tax positions. In Part XIII, provide the text of the footnote to the organization's financial statements that reports the				ote to the organization	r's financial stateme	nts that reports the	

Par			Ketum.
	Complete if the organization answered "Yes" on Form 990, Part		
1	Total revenue, gains, and other support per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12:	1	
a	Net unrealized gains (losses) on investments	<del></del>	-
b	Donated services and use of facilities	<del></del>	-
C	Recoveries of prior year grants	<del></del>	-
đ	Other (Describe in Part XIII.)	<del></del>	
e	Add lines 2a through 2d		2e
3			3
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a Other (Describe in Part XIII.)	<del> </del>	4 }
b	(2000)	<del></del>	40
С 5	Add lines <b>4a</b> and <b>4b</b>		4c   5
	XII Reconciliation of Expenses per Audited Financial Statements		
rait	Complete if the organization answered "Yes" on Form 990, Part		newiii.
1	Total expenses and losses per audited financial statements		1
2	Amounts included on line 1 but not on Form 990, Part IX, line 25:		- <u>'</u> -
a	Donated services and use of facilities		
b	Prior year adjustments	<del></del>	
C	Other losses	<del></del>	
d	Other (Describe in Part XIII.)	<del> </del>	1 ]
e	Add lines <b>2a</b> through <b>2d</b>	<del></del>	2e
3	Subtract line 2e from line 1		3
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b 4a		
b	Other (Describe in Part XIII.)	<del></del>	
c	Add lines <b>4a</b> and <b>4b</b>	<del></del>	4c
5	Total expenses. Add lines 3 and 4c. (This must equal Form 990, Part I, line 18.)		5
Part	XIII Supplemental Information.		· · · · · · · · · · · · · · · · · · ·
	te the descriptions required for Part II, lines 3, 5, and 9; Part III, lines 1a and 4; F t XI, lines 2d and 4b; and Part XII, lines 2d and 4b. Also complete this part to pre	ovide any additional in	
· <b></b>			
· <b></b>			
<b></b>			

	rm 990) 2018		Page <b>5</b>
Part XIII	Supplemental In	ormation (continued)	
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			***************************************
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### **SCHEDULE L** (Form 990 or 990-EZ)

**Transactions With Interested Persons** 

► Complete if the organization answered "Yes" on Form 990, Part IV, line 25a, 25b, 26, 27, 28a, 28b, or 28c, or Form 990-EZ, Part V, line 38a or 40b.

(10)

OMB No. 1545-0047

	Revenue Service	<b>▶</b> Go 1	o www.irs.gov/F			uctions and t		st information.		li Ii	pen i spec	tion	olic
Name	of the organization							Employ	yer identificat	ion nu	mber		
The B	itcoin Foundation								46-	16717	96		
Par		fit Transaction	ns (section 501 answered "Ye	(c)(3) s" on	, section Form 99	501(c)(4), a 0, Part IV, I	ind 50 line 25	1(c)(29) organiza a or 25b, or Fo	ations only m 990-EZ,	). Part	V, line	= 40b.	
			(b) Relationship be	etween	disqualified	person and		435	• • •			(d) Cor	rected?
1	(a) Name of disqualified	person		organiz		•	l	(c) Description	n of transactio	n		Yes	No
(1)											-		
(2)													
(3)							<u> </u>						
(4)							ļ						
(5)							ļ						
(6)								· · · · · · · · · · · · · · · · · · ·				<u> </u>	
2	Enter the amount					-	-	•	•				
	under section 4958							• • • • •		<b>▶</b> §	<u> </u>		
3	Enter the amount o	f tax, if any, on	line 2, above,	reimt	oursed by	the organ	izatior	1		▶ 9	§		
_		<del></del>	<del></del>			<u></u>							
Part		/or From Inter			Farm 00	0 EZ Dort	\/ line	20a or Earm 00	)() Dort IV	lina (1	6. 0.	ef Alba	
	organization r	eported an am	answered ite	990. F	Part X. line	u-ez, ran e 5. 6. or 2:	v, iirie 2.	38a or Form 99	o, Part IV,	iiie 2	o, or	ı une	
		T T	1	1	<u> </u>	7 0, 0, 0, 2.	 		· · · · ·	_		r	
(a) N	ame of interested person	(b) Relationship	(c) Purpose of		oan to or	(e) Ongir		(f) Balance due	(g) in default?				ritten
		with organization	loan		om the anization?	principal amount				by board of committee			
				<u> </u>	<del></del>				Yes No	<del> </del>	l Na	V	
(1)	Brock Pierc	Board Chair	Operating Exp	To	From	1	0,292	10,292	Yes No	Yes	No	Yes	No
(2)	DIOCK FIETC	Board Crian	Operating Exp	-		<u> </u>	0,232	10,232	<del>                                     </del>	┡	<del> </del>	<del></del>	<u> </u>
(3)		<del> </del>							<del>                                     </del>	<del></del>	<del>                                     </del>	<b></b> -	
(4)								<del></del>			<del>                                     </del>	$\vdash$	$\vdash$
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(8)	· · · · · · · · · · · · · · · · · · ·	<u> </u>									Ì		
(9)													
(10)													
Total		<u> </u>		<u> </u>			.▶ ;	\$					
Part	Grants or Ass	sistance Bene	fiting Interest	ed Pe	ersons.								
	Complete if the	e organization	answered "Ye	s" on	Form 990	0, Part IV, I	ine 27						
(a)	Name of interested persor		ship between inter- and the organization		(c) Amount	of assistance	(4	f) Type of assistanc	e (e)	) Purpo	ose of a	ssistan	ce
(1)													
(2)													
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For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Cat. No. 50056A

Schedule L (Form 990 or 990-EZ) 2018

art IV  Business Transactions Involving Complete if the organization ans	ng Interested Persons.	Part IV line 28a	28b. or 28c.		age
(a) Name of interested person	(b) Relationship between interested person and the organization	(c) Amount of transaction	(d) Description of transaction	(e) Sharing organization revenues?	
				Yes	No
1) CB Digital LLC (Liewellyn Claasen)	ED		Stipend & Operating Expenses Stipend & Operating Expenses		V
2) Newtown Partners, Inc (Llewellyn Claasen)	ED	32,590	Stipend & Operating Expenses	+-	~
3) 4)					
5)					
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rt V Supplemental Information.	<del></del>				•
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#### SGMEDULE O (Form 990 or 990-EZ)

### Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

OMB No 1545-0047

Open to Public Inspection

**Employer identification number** 

Department of the Treasury Internal Revenue Service Name of the organization ► Attach to Form 990 or 990-EZ.

► Go to www.irs.gov/Form990 for the latest information.

THE BITCOIN FOUNDATION 46-1671796 FORM 990, PART I, LINE 1 DESCRIPTION OF ORGANIZATION MISSION THE BITCOIN FOUNDATION COORDINATES THE EFFORTS OF THE MEMBERS OF THE BITCOIN COMMUNITY HELPING TO CREATE AWAREN BENEFITS OF BITCOIN, HOW TO USE IT AND ITS RELATED TECHNOLOGY REQUIREMENTS FOR TECHNOLOGISTS, REGULATORS, MEDIA A **EVERYONE ELSE GLOBALLY** FORM 990, Part VI, Section A, Line 6 THERE ARE TWO CLASSES OF MEMBERSHIP, INDIVIDUAL MEMBERS AND INDUSTRY MEMBERS THERE ARE NO STOCKHOLDERS INDIVIDUAL MEMBERS AND INDUSTRY MEMBERS BOTH HAVE THREE BOARD MEMBERS EACH REPRESENTING THEM SPECIAL MEETINGS CALLED BY WRITTEN DEMAND OF 15% OR MORE OF THE MEMBERSHIP FORM 990, PART VI, SECTION A, LINE 7A EACH MEMBER GETS ONE VOTE FOR ITEMS SUBMITTED TO THEIR MEMBERSHIP CLASS TO VOTE ON (E.G. BOARD ELECTIONS) FORM 990, PART VI, SECTION A, LINE 8B THERE ARE NO COMMITTEES WITH THE AUTHORITY TO ACT ON BEHALF OF THE GOVERNING BODY FORM 990, PART VI, SECTION B, LINE 11 THE FORM 990 IS REVIEWED INTERNALLY BY THE EXECUTIVE DIRECTOR A COPY IS THEN PROVIDED TO THE BOARD OF DIRECTORS PR THE FORM FORM 990, PART VI, SECTION C, LINE 19 OUR GOVERNING DOCUMENTS ARE KEPT IN A GITHUB REPOSITORY AT THE FOLLOWING ADDRESS https://github.com/pmlaw/The-Bitcoin-Foundation-Legal-Repo/tree/master/Bylaws ANYONE CAN VIEW THE BYLAWS AND MAKE PULL REQUESTS SUGGESTING EDITS TO THE BYLAWS THE BOARD THEN VOTES ON ANY SUGGESTED EDITS. OUR 990 RETURNS ARE PUBLISHED TO OUR WEBSITE AT https://bitcoinfoundation.org/about/irs-990-forms

Schedule O (Form 990 or 990-EZ) (2018)	Page .
Name of the organization	Employer identification number
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